

Business Licensing
1200 Madison Ave, Suite 100
Indianapolis, IN 46225
Phone: (317) 327-4316
Fax: (317) 327-8294
New _____ Renewal _____

Inspection fee: \$85.00
License fee: \$20.00

APPLICATION FOR
COMMERCIAL PARKING FACILITY REGISTRATION
CITY OF INDIANAPOLIS

Name of commercial parking facility: _____

Mailing address of commercial parking facility: _____ Zip code: _____

Business contact name: _____ Phone number: _____

Cell phone number: _____ E-mail address: _____

Physical address of the commercial parking facility: _____

Type (please check one): Garage _____ Lot _____

Parcel number(s): _____

Legal description of the real estate on which parking facility is located: _____

Square footage of the commercial parking facility: _____

Type of ground: surface _____ pavement _____ floor surface _____

Vehicle capacity of parking facility: _____

Name and address of all persons who have a fee or leasehold interest in the real property on which the commercial parking facility is to be located:

<u>Name</u>	<u>Address</u>	<u>Nature of interest in business</u>
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_____	_____	_____
_____	_____	_____
_____	_____	_____

Name and address of person who proposes to operate the commercial parking facility. If the registrant is a firm, the name and address of each partner shall be given. If the registrant is a corporation, the name and address of the resident agent and president shall be given:

<u>Name</u>	<u>Address</u>
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_____	_____
_____	_____

The nature of the drainage system for any commercial parking facility lot which was constructed or placed in operation after July 1, 1971: _____

The Registrant under this article shall submit with the registration for a scale drawing or plot plan of the commercial parking facility which shows the configuration of parking spaces, aisles, entrances, exits, barriers, outdoor signs and motor vehicle reservoir areas.

Legal status of business: Individual Proprietor _____ Partnership _____ Corporation _____ LLC _____

If Corporation or LLC, list state where incorporated or authorized: _____

Resident agent's name: _____

Resident agent's address: _____

If Corporation or Partnership, list the name and address of each officer, or partner:

Has the applicant, partner or any corporate officer of the applicant business ever been arrested or convicted of a felony, misdemeanor or ordinance violation other than a minor traffic charge: _____

If so, list type of conviction and jurisdiction: _____

Please indicate that you agree or disagree by marking yes or no for the following:

1. Licensee is in good standing and has not had any license or registration to operate a business revoked or suspended: Yes _____ No _____
2. Licensee is current with all City, County and State for any taxes, license fees, or any other indebtedness: Yes _____ No _____
3. The person signing this application has the authority to sign for the business being licensed: Yes _____ No _____
4. Licensee will permit inspections of the business and premises by public authorities acting pursuant to law: Yes _____ No _____
5. Licensee will conduct the business and premises in such a manner as not to create a nuisance or any sort of hazard to the public: Yes _____ No _____

**Please indicate that you agree or disagree by marking yes or no for the following
(continued):**

6. Licensee will keep the premises clean and free from any sort of rubbish or combustible or explosive material: Yes _____ No _____
7. Licensee agrees that the business and the premises on which the business is conducted will not be used for any unlawful purpose: Yes _____ No _____
8. Licensee agrees to comply with the Revised Code of Indianapolis and Marion County and all other applicable laws ordinances, regulations, orders and decisions of public officials:
Yes _____ No _____
9. Licensee understands that the license may be suspended or revoked, and the licensee will be subject to prosecution if any applicable law, ordinance, regulation, order or decision is violated:
Yes _____ No _____
10. Licensee agrees to notify the Controller in writing before assigning or transferring the license to any other person (if permitted by ordinance): Yes _____ No _____
11. Licensee agrees to apply in writing to the Controller before changing the location of the business (if permitted by ordinance): Yes _____ No _____
12. Licensee agrees to give the Controller written notice once the business ceases to exist:
Yes _____ No _____

The undersigned affirms under penalty for perjury that the answers, representations, and information provided in this application are true.

Signature: _____

Name printed: _____

Date signed: _____